

# COBRA Participants

October 2005

OFFICE OF HUMAN RESOURCES

## Open Enrollment Bulletin

**Monday, October 24, to 5:00 p.m. Monday, November 14, 2005.**

**REVIEW THE NEW 2006 RATES!**

**PLEASE REVIEW THIS BULLETIN AS THERE ARE  
IMPORTANT PLAN PROVIDER & PLAN FEATURE CHANGES.**



1. Use a #2 pencil when completing the pre-printed election form.
2. Keep a copy of each form you are submitting to OHR for your records.
3. Return your completed form(s) and all required documentation to OHR no later than 5:00 p.m. Monday, November 14, 2005. Please do not fold the election form. It is recommended that, if possible, you hand-deliver your forms and documentation to guarantee timely submission. NO FAXES.

**NOTE: If you are NOT making any changes, you do not have to turn in the election form!!**

### **HIGHLIGHTS**

- ♦ **NEW Dental Provider** – United Concordia
- ♦ Prescription (Rx)/Health Plans
- ♦ Vision
- ♦ Eligible Dependents – Who is eligible for coverage & how to add or delete coverage
- ♦ Medicare A & B and Medicare Part D
- ♦ Long Term Care Insurance

**ATTACHED FORMS** – also available on the HR Resource Library at [www.montgomerycountymd.gov](http://www.montgomerycountymd.gov)

- ♦ UCCI Dental PPO Claim Form – for use effective 01/01/06
- ♦ Dependent Addition Form

**Late, unsigned or incomplete forms, or forms without the necessary supporting documentation will NOT be accepted or processed.**

# 2006 Group Insurance

## ELIGIBLE DEPENDENTS

- Please review the dependents listed on your Open Enrollment election form.
- An ex-spouse is NOT permitted to remain a covered dependent. After a divorce, you must notify OHR within 60 days to delete coverage. Complete a Dependent Deletion Form and provide a copy of your divorce decree.
- If a listed dependent is no longer eligible, it is your responsibility to DELETE that dependent using a Dependent Deletion form available on the HR Resource Library
  - DELETED dependents will be removed from your record.
  - A deleted dependent may only be re-enrolled if they again become eligible.
    - If your child again becomes a full-time student before age 26.
    - An ex-spouse that you re-marry.
- Effective 01/01/06, eligible dependents with no coverage can remain listed until the earlier of:
  - Age 19 (age 26 if a full-time student; any age if disabled), marriage, or death - for a dependent child.
  - Divorce or death - for a spouse.
  - End of domestic partnership or death – for domestic partner.



## CHANGE IN STATUS

- Open Enrollment changes will be effective 01/01/2006.
- Any mid-year changes, due to a Qualified Status Change must be submitted within sixty (60) days of the event.
  - The effective date of the change will be the date OHR is provided with ALL completed forms and documentation.
  - For newborns and adoptions only, the change will be retroactive to date of birth or adoption, if OHR is notified within the first 60 days.

## COBRA (CONTINUATION OF COVERAGE)

- Any dependent who is deleted within 60 days of a Qualified Status Change (refer to your SPD) and who loses coverage will be offered notice of their rights to continue coverage.
- Any eligible dependent for whom coverage is cancelled by an Open Enrollment election is not eligible for COBRA continuation coverage.
- If notification is received by OHR after 60 days of a Qualified Status Change, the dependent will be removed from coverage and COBRA will NOT be offered.
- Refer to the COBRA section of the Summary Plan Document for additional details.

## MEDICARE A & B

- All County health plans pay claims for Medicare eligible participants as if they have elected Medicare Parts A & B at age 65, or earlier if eligible

## MEDICARE PART D

- Please review the Creditable Coverage Notice in your Summary Plan Document.

# **2006 Group Insurance – Continued**

## **NEW DENTAL PROVIDER (PPO OR DHMO)**

### **UNITED CONCORDIA, INC. (UCCI)**



- Effective 01/01/2006.
- If you do not make any changes to your dental coverage during Open Enrollment, you will be automatically enrolled in the same type of dental plan (PPO or DHMO) with UCCI that you were previously enrolled in on 12/31/2005.
- To retain your same type of dental coverage, it is NOT necessary for you to do anything.

## **PLAN PROVISIONS**

- PPO PLAN PROVISIONS ARE EQUIVALENT TO THE 2005 PLAN PROVISIONS.
- DHMO plan provisions have changed; please review the enclosed new DHMO provisions. Current participants will receive a separate mailing from UCCI to review the plan provisions.

## **NETWORK INFORMATION**

- UCCI has a larger network of participating dental providers (PPO & DHMO).
- Current UCCI provider directories are available online (see below).
- PPO participants may choose any dental provider, however, UCCI network providers will offer greater savings to you and your family.

## **DENTAL ID CARDS**

- PPO ID Cards will be mailed to all enrolled participants by 12/31/05.
- After 01/01/06, you may print out an ID card from the UCCI website under “My Dental Benefits.”
- For DHMO participants, UCCI will automatically assign you a UCCI primary dentist. If you wish to change your primary dentist, you may call UCCI directly AFTER you have received your ID card. The phone number will be on your ID card.

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## **UCCI Plan and Provider Information**

- To locate a participating dentist, plan materials or personal account information, log on to:
  - [www.ucci.com](http://www.ucci.com)
  - Click on “Client’s Corner”
  - Click on “Montgomery County Government”

Customer Service: 866-851-7564

# **2006 Group Insurance – Continued**

Dental Continued from page 3

## **CLAIMS**

- 2006 claims must be submitted to UCCI. The new UCCI claim form is included in this bulletin and is available in the County's HR Resource Library.
- The deadline to submit 2005 claims to CIGNA is June 30, 2006.

## **WORK IN PROGRESS**

- Orthodontia – Participants with CIGNA payment plans will be mailed a UCCI "Ortho In Progress Treatment Plan" by 12/31/05. Orthodontia claims must be submitted to UCCI after 12/31/05 regardless of the date of service.
- Fixed Bridgework, Crowns, Inlays and Onlays – Covered by UCCI only if initiated after 12/31/05
- Certain procedures initiated prior to 01/01/06, will be covered and should be submitted to CIGNA Dental until 03/31/06. Reference page 9 of the CIGNA PPO plan booklet for additional details.
- Endodontics – Claims reimbursed by UCCI based on the completed date of service.

## **PRESCRIPTION (RX)/HEALTH PLANS**

- Rx coverage (High or Standard option) is now available to any participant, regardless of your medical plan election.
  - For example, you may now elect CareFirst High Option POS medical with Caremark Standard Option Rx coverage or vice versa.
- No plan provision changes.
- See Plan Comparison Chart in Summary Plan Document (pages 22-31).



## **VISION**

- Expanded NVA network of participating providers now includes most national chains. See online directory to search for a specific provider.
- Limited time Lasik discount: January - June 2006.
  - The NVA provider, The Laser Center (TLC), has agreed to lower their prices for NVA plan participants and their covered dependents.
    - \$3200 Regular Lasik for both eyes (discounted from \$5000).
    - \$4200 Custom Lasik for both eyes (discounted from \$5600).
  - NVA standard Lasik discount of 15% not to exceed \$3600 is ongoing at participating providers.



# Seasonal Questions and Answers

**Q. What happens if I don't complete an election form OR make any changes OR submit a form that isn't filled out correctly OR I forget to sign the form?**

**A.** *Then your coverage for 2006 will be the same plans and levels of coverage that you have now. Late, incomplete or unsigned forms will not be accepted or processed.*

**Q. What happens if I complete the Dependent Addition Form, but do not submit proof of eligibility, such as marriage or birth certificates to add dependents?**

**A.** *Then you and your current dependents will remain enrolled; any new dependent(s) will NOT be enrolled. Dependents will not be added without proof of eligibility.*

**Q. What happens if I complete and sign the election form, but accidentally elect more than one medical or dental plan; or elect a coverage I didn't have under COBRA?**

**A.** *The form will be processed, but you will keep your current plan(s)/coverage levels.*

## HELP REDUCE PLAN COSTS

### ➤ STOP FRAUD

- If you are aware of claims fraud, please report it directly to the insurance plan.
- If you are aware of an ineligible dependent being covered, please report it directly to the Benefits Team.

### ➤ SAVE A TREE

- Please use online resources whenever possible to reduce our need to order directories and other plan materials.
- Health Plan materials have not changed. Up-to-date directories are available online.

## Election Form Abbreviations

### **Plan**

### **Abbreviation**

#### MEDICAL

CareFirst High Option POS	HI OPT POS
CareFirst Standard Option POS	ST OPT POS
CareFirst High Option POS Out of Area	HI OPT POS-OOA
CareFirst Standard Option POS Out of Area	ST OPT POS-OOA
Optimum Choice	OPT CH
Kaiser Permanente (includes Kaiser Rx)	KAI W/ KAI RX
No Medical	NONE

#### PRESCRIPTION

Caremark High Option \$4/\$8 Plan	\$4/\$8
Caremark Standard Option \$10/\$20/\$35 Plan	\$10/\$20/\$35
No Prescription	NONE

#### DENTAL

Dental PPO (Traditional Dental Plan)	PPO
Dental HMO (DHMO)	HMO
No Dental	NONE

#### VISION

Vision	VIS
No Vision	NONE

## **Benefit Fairs**

### **Date**

10/25/05

10/31/05

11/03/05

11/04/05

### **Time**

11:00 – 2:00

2:30 – 4:30

11:00 – 2:00

11:00 – 2:00

### **Location**

EOB Cafeteria

Up-County Government Center

EOB Cafeteria

EOB Cafeteria

EOB – Executive Office Building, 101 Monroe St., Rockville, MD

Up County Center – 12900 Middlebrook Rd., Germantown, MD

## **Important Phone Numbers and Web Sites**

### **Medical Plans**

CareFirst BCBS Member Services

Kaiser Permanente Member Services

Washington Area

Baltimore Area

Optimum Choice Member Services

### **Dental Plans**

United Concordia Dental PPO

United Concordia Dental Care DHMO

### **Vision Plan**

NVA

### **Prescription Plan**

Caremark

### **COBRA Administrator**

Conexis

### **Office of Human Resources**

benefits@montgomerycountymd.gov

### **Telephone**

888-417-8385

301-468-6000

800-777-7902

301-360-8115

800-709-7604

866-851-7564

866-468-2393

866-240-4926

877-722-2667

240-777-5120

877-613-5212

240-777-5126 (TTY)

Fax 240-777-5131

### **Web Sites**

www.carefirst.com

www.kaiserpermanente.org

www.mamsi.com

www.ucci.com

- Click on Client's Corner

- Click on "Montgomery County Government"

www.e-nva.com

www.caremark.com

www.conexis.com

www.montgomerycountymd.gov

- HR Resource Library

- e-Subscription Lists

***TIP! Keep this list of phone numbers and web sites for year round use. Cut it out and put it with your other important phone numbers!***

## **WEB LOCATION FOR ON-LINE RESOURCES**

### **www.montgomerycountymd.gov**